

06-05-06

FEE TRANSMITTALAF
JFW

Application Number 09/829,549
 Filing Date April 10, 2001
 Inventor(s) James T. English, et al.
 Examiner Name Teresa D. Wessendorf
 Attorney Docket Number UMO 1521.1

Art Unit 1639
 Confirmation No. 8198



☒ Applicant claims small entity status.

METHOD OF PAYMENT

- ☐ The Commissioner is hereby authorized to charge the indicated fees to Deposit Account No. 19-1345. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.
- ☒ Check Enclosed. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

FEE CALCULATION

1. ☐ BASIC FILING, SEARCH AND EXAMINATION FEES
 (Type: _____) Subtotal (1) \$ _____

2. ☐ EXCESS CLAIM FEES

Total Claims ____ - ____ (HP) = 0 x Fee ____ = \$ 0.00
 Indep Claims ____ - ____ (HP) = 0 x Fee ____ = \$ 0.00
 Multiple Dependent Claims Fee \$ _____
 (HP = highest number of claims paid for)

Subtotal (2) \$ 0.00

3. ☐ APPLICATION SIZE FEE

Total Pages N/A - 100 = NaN ÷ 50 = 0 x \$ ____ = \$ 0.00
 (Application + Drawings) (round up to whole #)

Subtotal (3) \$ 0.00

4. ☒ OTHER FEE(S)

- ☒ Three (3) month extension of time
☐ Information disclosure statement
☐ 37 CFR 1.17(q) processing fee
☐ Non-English specification
☐ Notice of Appeal
☒ Filing a brief in support of appeal
☐ Request for oral hearing
☐ Other: _____

Subtotal (4) \$ 760.00

TOTAL AMOUNT OF PAYMENT \$ 760.00

Edward J. Hejlek
 Reg. No. 31,525

6/2/06

Date
 Telephone: 314-231-5400

EJH/clh

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